

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

American Academy of Dermatology Association Political Action Committee (SkinPAC)

ADDRESS (number and street)

1445 New York Avenue NW

Ste 800

Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00359539

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Quarterly Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2011

through

01

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Steven Debnar

Signature of Treasurer

Electronically Filed by Steven Debnar

Date

02

18

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Accidently deposited \$100 corporate contribution, cut a refund check on 2/18/11.

Transaction ID :

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 1 1

To:

M M
0 1D D
3 1Y Y Y Y
2 0 1 1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2011		257375.07
(b) Cash on Hand at Beginning of Reporting Period	257375.07	
(c) Total Receipts (from Line 19)	15715.00	15715.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	273090.07	273090.07
7. Total Disbursements (from Line 31)	299.41	299.41
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	272790.66	272790.66
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	1	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	14001.00	14001.00
(ii) Unitemized	1714.00	1714.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	15715.00	15715.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	15715.00	15715.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	15715.00	15715.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	15715.00	15715.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	299.41	299.41	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	299.41	299.41	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	299.41	299.41	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	299.41	299.41	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	15715.00	15715.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15715.00	15715.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	299.41	299.41
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	299.41	299.41

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

A.

Full Name (Last, First, Middle Initial)

Daniel Kenneth McKenzie

Mailing Address 23772 Salvador Bay

City

Dana Point

State

CA

Zip Code

92629-4207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 3 / 2 0 1 1

Transaction ID: AA1F4D8F480254BF0BD2

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

James Selwyn Taylor

Mailing Address 28150 Fairmount Blvd

City

Pepper Pike

State

OH

Zip Code

44124-4620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cleveland Clinic Foundati-
on

Occupation
Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 0 / 2 0 1 1

Transaction ID: A5F21F867DC1444B9BF6

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Melanie L. Appell

Mailing Address 7915 Hampton PI

City

Vestavia

State

AL

Zip Code

35242-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer
Total Skin & Beauty Derm
Center

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 1 / 2 0 1 1

Transaction ID: A1FA85C48ED0D4714843

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

A.

Full Name (Last, First, Middle Initial)

Rex A. Amonette

Mailing Address 665 S Willett St

City

Memphis

State

TN

Zip Code

38104-4932

FEC ID number of contributing
federal political committee.

C

Name of Employer
Memphis Dermatology Clini-
c, PA

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 8 / 2 0 1 1

Transaction ID: A394F13EA6AF44A958E2

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Eduardo G. Rivera

Mailing Address 3652 Shoshonee Dr

City

Columbus

State

IN

Zip Code

47203-2522

FEC ID number of contributing
federal political committee.

C

Name of Employer
Skin Solutions

Occupation
Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 8 / 2 0 1 1

Transaction ID: A3C76B07EB89A4BF8AB2

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Michael D. Zanolli

Mailing Address 513 Fairfax Ave

City

Nashville

State

TN

Zip Code

37212-4010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heritage Medical Associat-
es

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: ABBCE7195A0D146199B8

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

A.

Full Name (Last, First, Middle Initial)

Ronald P. Rapini

Mailing Address 4148 Cason St

City

Houston

State

TX

Zip Code

77005-3559

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of TexasOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 6 / 2 0 1 1

Transaction ID: AC6D1A2DCB84A4FDCA4F

Amount of Each Receipt this Period

251.00

B.

Full Name (Last, First, Middle Initial)

Anthony Guy Campo, Jr.

Mailing Address 223 Shore Rd

City

Somers Point

State

NJ

Zip Code

08244-2631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 8 / 2 0 1 1

Transaction ID: AF6A7D79CD4284483A13

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional)

1751.00

TOTAL This Period (last page this line number only)

14001.00